

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No 1215 0188
Expires 11 30 2006

This report is mandatory under P L 86 257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440

For Official Use Only



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U <u>11667</u>	2 Fiscal Year Covered From <u>1</u> / <u>1</u> / <u>2005</u> Through <u>12</u> / <u>31</u> / <u>2005</u>
3 Name and address of person filing Name <u>Enrique K Subano</u> P O Box Bldg Room No if any <u>P O Box 17250</u> Street _____ City <u>Honolulu</u> State <u>Hawaii</u> ZIP Code + 4 <u>96817</u>	4 Name file number and address of labor organization Name <u>United Union of Roofers, Waterproofer & Allied Workers, Local 221</u> Labor Organization File Number <u>012210</u> P O Box Building and Room Number if any <u>P O Box 17250</u> Street _____ City <u>Honolulu</u> State <u>Hawaii</u> ZIP Code + 4 <u>96817</u>
5 Position in labor organization _____	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	
6 Name and address of Employer (including trade name if any) Name _____ Trade Name if any _____ P O Box Bldg Room No if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	7 a Nature of Interest Transaction or Income _____ 7 b Amount _____

Signature _____

15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct and complete (See the section on penalties in the instructions)

Signed Enrique K Subano

On 3-14-06
Date

208 247 5157
Telephone Number

Name of Person Filing Enrique L Subono

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Rafers Local 221 Training Fund

Trade Name if any

P O Box Bldg Room No if any

Street 1199 Dillingham Blvd #200City HonoluluState Hawaii ZIP Code + 4 96817

9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name Rafers Local 221 Trust Fund

Trade Name if any

P O Box Bldg Room No if any

Street 1199 Dillingham Blvd #200City HonoluluState Hawa ZIP Code + 4 96817

11 a Nature of such dealing

Training Coordinator

11 b Approximate dollar value of such dealing

12 a Nature of interest held or income received

Salary

12 b Amount

\$ 64,381.60

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer or Consultant ?

14 b Amount of payment

Name of Person Filing Enrique K Subono	File Number U
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name **Roofers Local 221 Training Fund**

Trade Name if any

P O Box Bldg Room No if any

Street **1199 Dillingham Blvd #200**

City **Honolulu**

State **Hawaii**

ZIP Code + 4 **96817**

9 Business deals with

a Labor Organization

☒ b Trust

c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name **Roofers Local 221 Trust Fund**

Trade Name if any

P O Box Bldg Room No if any

Street **1199 Dillingham Blvd #200**

City **Honolulu**

State **Hawaii**

ZIP Code + 4 **96817**

11 a Nature of such dealing

Training Coordinator

11 b Approximate dollar value of such dealing

12 a Nature of interest held or income received

Instructor Fees

12 b Amount

\$ 810.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State

ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer

or Consultant

?

14 b Amount of payment

Name of Person Filing Enrique K Subono	File Number U
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any) Name Rafers Local 221 Training Fund Trade Name if any _____ P O Box Bldg Room No if any _____ Street 1199 Dillingham Blvd #200 City Honolulu State Hawaii ZIP Code + 4 96817	9 Business deals with a Labor Organization <input checked="" type="checkbox"/> b Trust c Employer
10 If 9 b or 9 c is checked give trust or employer's name Name Rafers Local 221 Trust Fund Trade Name if any _____ P O Box Bldg Room No if any _____ Street 1199 Dillingham Blvd #200 City Honolulu State Hawaii ZIP Code + 4 96817	11 a Nature of such dealing Training Coordinator <hr/> 11 b Approximate dollar value of such dealing <hr/> 12 a Nature of interest held or income received Construction Industry Benefits Conference <hr/> 12 b Amount \$ 3165 42

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Name _____ Trade Name if any _____ P O Box Bldg Room No if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	14 a Nature of payment
13 b Is the Business an Employer or Consultant ?	14 b Amount of payment

Name of Person Filing Enrique L Subano	File Number U
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

<p>8 Name and address of Business (including trade name if any)</p> <p>Name Rafers Local 221 Training Fund</p> <p>Trade Name if any _____</p> <p>P O Box Bldg Room No if any _____</p> <p>Street 1199 Dillingham Blvd #200</p> <p>City Honolulu</p> <p>State Hawaii ZIP Code + 4 96817</p>	<p>9 Business deals with</p> <p>a Labor Organization</p> <p><input checked="" type="checkbox"/> b Trust</p> <p>c Employer</p>
<p>10 If 9 b or 9 c is checked give trust or employer's name</p> <p>Name Rafers Local 221 Trust Fund</p> <p>Trade Name if any _____</p> <p>P O Box Bldg Room No if any _____</p> <p>Street 1199 Dillingham Blvd #200</p> <p>City Honolulu</p> <p>State Hawaii ZIP Code + 4 96817</p>	<p>11 a Nature of such dealing</p> <p>Training Coordinator</p> <p>11 b Approximate dollar value of such dealing _____</p> <p>12 a Nature of interest held or income received</p> <p>Auto expense</p> <p>12 b Amount \$2511.60</p>

<p>C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value</p>	
<p>13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)</p> <p>Name _____</p> <p>Trade Name if any _____</p> <p>P O Box Bldg Room No if any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>14 a Nature of payment</p> <p>_____</p>
<p>13 b Is the Business an Employer or Consultant ?</p>	<p>14 b Amount of payment</p>

Name of Person Filing Enrique L Subano	File Number U
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any) Name Roofers Local 221 Training Fund Trade Name if any _____ P O Box Bldg Room No if any _____ Street 1199 Dillingham Blvd #200 City Honolulu State Hawaii ZIP Code + 4 96817	9 Business deals with a Labor Organization <input checked="" type="checkbox"/> b Trust c Employer
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10 If 9 b or 9 c is checked give trust or employer's name Name Roofers Local 221 Trust Fund Trade Name if any _____ P O Box Bldg Room No if any _____ Street 1199 Dillingham Blvd #200 City Honolulu State Hawaii ZIP Code + 4 96817	11 a Nature of such dealing Training Coordinator
	11 b Approximate dollar value of such dealing 12 a Nature of interest held or income received office supplies reimbursement
	12 b Amount \$1212.33

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Name _____ Trade Name if any _____ P O Box Bldg Room No if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	14 a Nature of payment _____
13 b Is the Business an Employer or Consultant ?	14 b Amount of payment _____